



MARICOPA COUNTY JUSTICE COURT

If you want to file a...

SMALL CLAIMS REPLY TO COUNTERCLAIM



MARICOPA COUNTY JUSTICE COURT



A counterclaim is a claim made by the defendant against the plaintiff. If the defendant files a counterclaim, you (the plaintiff, *counter-defendant*) have **TWENTY (20) calendar days** from the date received in which to file a **Reply to Counterclaim**.

There is no fee to file a Reply to Counterclaim.


A DEFAULT JUDGMENT MAY BE ENTERED FOR FAILURE TO REPLY TO THE COUNTERCLAIM

If the defendant files a **counterclaim** for an amount **exceeding \$2500.00**, the court shall transfer the case to the civil division. If the amount of the counterclaim **exceeds \$9,999.99** the case will be transferred to the **Superior Court**.

Please STOP...

	If you have not received a Counterclaim.
	If your time to answer has expired and there has already been a judgment rendered.

Please PROCEED...

	If you are within the time allowed for filing a Reply to Counterclaim.
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FORMS Needed:

<input checked="" type="checkbox"/>	Small Claims Counterclaim/Reply to Counterclaim
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INSTRUCTIONS

- 1) Complete the form and make copies. The court will require an original and you may wish to keep a copy; additionally each named defendant will need a copy of your reply.
- 2) File (or mail) the original form with the court clerk
- 3) Mail copies to the defendant(s) via regular US mail.

IT IS IMPORTANT THAT ALL PARTIES KEEP THE COURT APPRISED OF ANY CHANGE IN ADDRESS A NOTICE OF CHANGE OF ADDRESS form must be filed with the court when a party changes their address.

Visit us at www.superiorcourt.maricopa.gov/justicecourts for additional filing information and online forms.

Plaintiff or Attorney for Plaintiff

Address

Maricopa County Justice Courts, State of Arizona

CASE NUMBER: _____

Plaintiff(s) Name / Address

Defendant(s) Name / Address

SMALL CLAIMS COUNTERCLAIM / REPLY TO COUNTERCLAIM

DEFENDANT'S COUNTERCLAIM IN THE AMOUNT OF \$ _____

In addition to my ANSWER to plaintiff's complaint, I counterclaim for the amount stated, for the following reasons:

Date: _____

Defendant/ Counterclaimant

I CERTIFY that I mailed a copy of this COUNTERCLAIM to the Plaintiff at the above address.

Date: _____

By: _____
Defendant / Counterclaimant

PLAINTIFF'S REPLY TO COUNTERCLAIM:

I do not owe the defendant, because:

Date: _____

Plaintiff / Counter-defendant

I CERTIFY that I mailed a copy of this REPLY TO COUNTERCLAIM to the Defendant at the above address.

Date: _____

By: _____
Plaintiff / Counter-defendant